Application or Docket Numb	pp	olication	or	Docket	Numbe
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## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

		CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL TYPE	ENTITY	OR	OTHER THAN SMALL ENTITY	
	FC	PR	NUMBE	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
	ВА	SIC FEE		·:					345.00	OR	n kernistisi.	690.00
	то	TAL CLAIMS	19	minus 2	20= *			X\$ 9=		OR	X\$18=	
	IND	EPENDENT CL	AIMS 3	minus	3 = *			X39=		OR	X78=	
	MU	MULTIPLE DEPENDENT CLAIM PRESENT						+130=		OR	+260=	/
	* If	the difference i	in column 1 is	less than ze	ro, enter "0" in o	column 2	L	TOTAL		OR	TOTAL	690
		CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
	AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	NON	Total	· <u> </u>	Minus	<u> </u>	= 4		X\$ 9=		OR	X\$18=	72
	AME	Independent	* VIATION OF MI	Minus	PENDENT CLAIM	=	1/1	X39=		OR	875=	336
		as of a	100 Cm		20 00.	اــــــــــــــــــــــــــــــــــــ		+130=		OR	+260=	
	Q	5000	100 V	Dark W	an only	·	/ <u>L</u>	TOTAL DDIT. FEE		80	TOTAL SEE FEE	408
		Y 7	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	i =			V		
	ENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	NDM	Total	*	Minus	**	= .		X\$ 9=		OR	X\$18=	
	AMENDM	Independent	*	Minus	***	=		X39=		OR	X78=	
<b>1</b>		FIRST PRESE	VIATION OF MU	JLTIPLE DEF	PENDENT CLAIM			+130=		OR	+260=	
			*	•			L	TOTAL DDIT. FEE			TOTAL	
		(Column 1) (Column 2) (Column 3)						וטטוו. רבב ו		. ע	ADDIT. FEE	
	AMENDWENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
	ME	Independent	*	Minus	***	=		X39=			X78=	
	≪	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT CLAIM		-	700-	·	OR	X/0=	
	* 1	f the entry in eater	on 1 is loss than th	o ootny in only	mp 2 write "0" in an	lump 2		+130=		OR	+260=	
	**	If the "Highest Num	nber Previously Pa	id For" IN THIS	mn 2, write "0" in co S SPACE is less tha S SPACE is less tha	n 20, enter "20.	" A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
					Independent) is the		er four	nd in the app	ropriate box	in col	umn 1.	